

JUL 19 2004

FAX TRANSMISSION

OFFICIAL

DATE: July 19, 2004

PTO IDENTIFIER: Application Number 10/010,140-Conf. #4761
Patent NumberInventor: Jan Eirik ELLINGSEN *et al.*

MESSAGE TO: US Patent and Trademark Office

FAX NUMBER: (703) 872-9306

FROM: LAHIVE & COCKFIELD, LLP

Elizabeth A. Hanley

PHONE: (617) 227-7400

Attorney Dkt. #: AWZ-003

PAGES (Including Cover Sheet): 6

CONTENTS: Transmittal (1 page);
Fee Transmittal (1 page), in duplicate;
Request for Extension of Time (1 page); and
Notice of Appeal (1 page).
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LAHIVE & COCKFIELD, LLP
28 State Street, Boston, Massachusetts 02109
Telephone: (617) 227-7400 Facsimile: (617) 742-4214

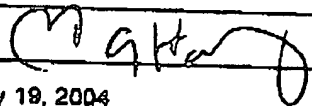
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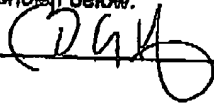
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<h1 style="text-align: center;">TRANSMITTAL FORM</h1> <p style="text-align: center;">(to be used for all correspondence after initial filing)</p>		Application Number	10/010,140-Conf. #4761
		Filing Date	December 6, 2001
		First Named Inventor	Jan Eink ELLINGSEN
		Art Unit	3738
		Examiner Name	D. J. Isabella
Total Number of Pages in This Submission		Attorney Docket Number	AWZ-003

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below)
Remarks: _____		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	LAHIVE & COCKFIELD, LLP Elizabeth A. Hanley - 33,505
Signature	
Date	July 19, 2004

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Dated: July 19, 2004	Signature:  (Elizabeth A. Hanley)

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PTO/SB/17 (10-03)
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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003 Patent fees are subject to annual revision

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)		640.00	
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METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account Number: **12-0080**

Deposit Account Name: **Lahive & Cockfield, LLP**

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) or any underpayment of fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Large Entity Fee (\$)	Small Entity Fee Code (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	150	2005	80	Provisional filing fee	
SUBTOTAL (1) (\$)					0.00

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims: **8** -- = **0**

Independent Claims: **1** -- = **0**

Multiple Dependent: **0** -- = **0**

Large Entity Fee Code (\$)	Large Entity Fee (\$)	Small Entity Fee Code (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
1202	18	2202	9	Claims in excess of 20	
1201	86	2201	43	Independent claims in excess of 3	
1203	290	2203	145	Multiple dependent claim, if not paid	
1204	88	2204	43	Reissue independent claims over original patent	
1205	18	2205	9	Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2) (\$)					0.00

or number previously paid, if greater. For Reissues, see above

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Large Entity Fee (\$)	Small Entity Fee Code (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	2053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
1804	920	1804	920	Requesting publication of SJR prior to Examiner action	
1805	1,840	1805	1,840	Requesting publication of SJR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	420	2252	210	Extension for reply within second month	
1253	950	2253	475	Extension for reply within third month	475.00
1254	1,480	2254	740	Extension for reply within fourth month	
1255	2,010	2255	1,005	Extension for reply within fifth month	
1401	330	2401	165	Notice of Appeal	165.00
1402	330	2402	165	Filing a brief in support of an appeal	
1403	290	2403	145	Request for oral hearing	
1451	1,510	2451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,330	2453	665	Petition to revive - unintentional	
1501	1,330	2501	665	Utility issue fee (or reissue)	
1502	480	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
1460	130	2460	130	Petitions to the Commissioner	
1807	50	2807	50	Processing fee under 37 CFR 1.17(g)	
1808	180	2808	180	Submission of information Disclosure Stmt	
8021	40	28021	40	Recording each patent assignment per property (times number of properties)	
1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(b))	
1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))	
1801	770	2801	385	Request for Continued Examination (RCE)	
1802	900	2802	900	Request for expedited examination of a design application	
Other fee (specify):					
*Reduced by Basic Filing Fee Paid					
SUBTOTAL (3) (\$)					640.00

SUBMITTED BY

Name (Print/Type)	Elizabeth A. Hanley	Registration No. (Attorney/Agent)	33,505	Telephone (if applicable)	(617) 227-7400
Signature		Date	July 19, 2004		

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